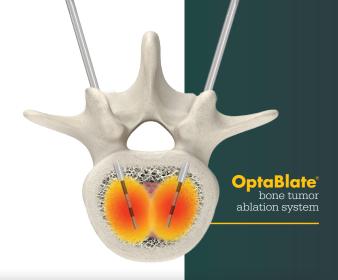
stryker

Clinical cases collection



Physician

Dr. Alex Lionberg

Community Hospital Munster, Indiana

Clinical case

Patient: Female, 76

Level: L1

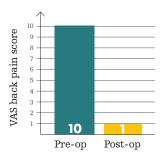
Reason: Vertebral tumor and compression

fracture with wedge deformity

Case type: OptaBlate 20mm and

iVAS Elite 10g 15mm

Visual analog scale



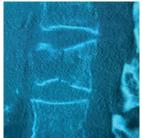
Case presentation

A 76-year-old female suffered a fall, resulting in sudden onset back pain. The patient initially presented to the hospital with severe pain and was unable to undergo conservative therapy. A chest X-ray and MRI revealed a lung mass, but did not definitively show a lesion. A CT abdomen was ordered for an unrelated issue and revealed a suspected lytic lesion at the fractured site. The patient underwent a biopsy of the lesion, bone tumor ablation and balloon kyphoplasty in a single session.

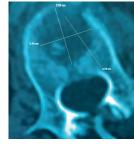
The procedure was successfully completed in approximately 40 minutes, using the 20mm OptaBlate ablation probes and a bi-lateral approach. The balloon kyphoplasty was performed using iVAS Elite and filled with 5ccs of VertaPlex HV bone cement.

Prior to the procedure, the patient reported a pain score of 10/10 on the VAS scale. At the time of discharge, the patient reported pain was reduced to a 1/10.

Pre-op images

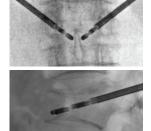


Pre-op CT (lateral view)



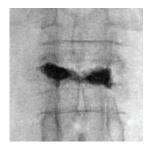
Pre-op CT (axial view)

Surgical procedure



Procedure fluoro (AP and lateral view)

Post-op images



Post-op fluoro (AP view)



Post-op fluoro (lateral view)



Interventional Spine

Bone cement: Serious adverse events, some with fatal outcome, associated with the use of bone cements for vertebroplasty, kyphoplasty and sacroplasty include myocardial infarction, cardiac arrest, cerebrovascular accident, pulmonary embolism and cardiac embolism. Although it is rare, some adverse events have been known to occur beyond one year post-operatively. Additional risks exist with the use of bone cement. Please see the IFU for a complete list of potential risks.

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